PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10717195

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Coll	(Column 2)		TYPE		OR		
			16		ļ			RATE	FEE	4	RATE	FEE
F	DR 		NUMBER FILED		NUMBER EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00
T	OTAL CHARGE	ABLE CLAIMS	16 minus 20=		*	·		X\$ 9=		OR	X\$18=	
IN	DEPENDENT C	LAIMS	3 minus 3 = 1		*			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter					"0" in (column 2		TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II							OTHER THAN					
		(Column 1)	<u>,</u>	(Colun		(Column 3)		SMALL	ENTITY	·OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š Š	Total .	*	Minus	** :		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> </u>		X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT			CLAIM			+145=			+290=		
								TOTAL	- "	OR	TOTAL	
		A	DDIT. FEE	<u> </u>	OR ,	ADDIT. FEE						
		(Column 1)	,	(Colum		(Column 3)		•				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		!	+145=		OR	+290=	
			Δ.	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE					
					. ,							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus	**	!	=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=			X86=	C
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
A MAN and the section of the least the order to polymore Quarter MON to polymore Q										OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												